

Sayreville Board of Education

Bills And Claims Report By Vendor Name

Prescription Account - January 20, 2026

va_bill5.032923
11/30/2025

Vendor # / Name	PO #	Account # / Description	Inv #	Check Type *	Check Description or Multi Remit To Check Name	Check #	Check Amount
Unposted Checks							
CVS PHARMACY, INC./ 2412							
	26-81001	81-000-291-270-000-55-02/ Self Insured Prescriptio	12/01/25-12/07/ 25	HF	Self Insured Prescriptio	81121725	70,489.98
	26-81003	81-000-291-270-000-55-02/ Self Insured Prescriptio	12/01/25-12/07/ 25	HF	Self Insured Prescriptio	81121725	38,714.63
	26-81004	81-000-291-270-000-55-02/ Self Insured Prescriptio	12/01/25-12/07/ 25	HF	Self Insured Prescriptio	81121725	321.09
	26-81001	81-000-291-270-000-55-02/ Self Insured Prescriptio	12/08/25-12/15/ 25	HF	Self Insured Prescriptio	81122325	71,521.94
	26-81003	81-000-291-270-000-55-02/ Self Insured Prescriptio	12/08/25-12/15/ 25	HF	Self Insured Prescriptio	81122325	80,965.69
	26-81004	81-000-291-270-000-55-02/ Self Insured Prescriptio	12/08/25-12/15/ 25	HF	Self Insured Prescriptio	81122325	121.16
	26-81001	81-000-291-270-000-55-02/ Self Insured Prescriptio	12/16/25-12/23/ 25	HF	Self Insured Prescriptio	81010526	70,707.40
	26-81003	81-000-291-270-000-55-02/ Self Insured Prescriptio	12/16/25-12/23/ 25	HF	Self Insured Prescriptio	81010526	72,519.64
	26-81004	81-000-291-270-000-55-02/ Self Insured Prescriptio	12/16/25-12/23/ 25 AD	HF	Self Insured Prescriptio	810108261	33.14
	26-81001	81-000-291-270-000-55-02/ Self Insured Prescriptio	12/24/25-12/31/ 25	HF	Self Insured Prescriptio	810108262	65,601.39
	26-81003	81-000-291-270-000-55-02/ Self Insured Prescriptio	12/24/25-12/31/ 25	HF	Self Insured Prescriptio	810108262	60,641.63
	26-81004	81-000-291-270-000-55-02/ Self Insured Prescriptio	12/24/25-12/31/ 25	HP	Self Insured Prescriptio	810108262	-23.17
	26-81001	81-000-291-270-000-55-02/ Self Insured Prescriptio	DEC 25 ADMIN	HF	Self Insured Prescriptio	810108263	616.50
	26-81003	81-000-291-270-000-55-02/ Self Insured Prescriptio	DEC 25 ADMIN	HF	Self Insured Prescriptio	810108263	1,808.73
	26-81004	81-000-291-270-000-55-02/ Self Insured Prescriptio	DEC 25 ADMIN	HF	Self Insured Prescriptio	810108263	5.30
	26-81001	81-000-291-270-000-55-02/ Self Insured Prescriptio	01/01/26-01/07/ 26	HF	Self Insured Prescriptio	81011426	74,503.12
	26-81003	81-000-291-270-000-55-02/ Self Insured Prescriptio	01/01/26-01/07/ 26	HF	Self Insured Prescriptio	81011426	63,058.24
Total for CVS PHARMACY, INC./ 2412							\$671,606.41

* CF -- Computer Full CP - Computer Partial HF - Hand Check Full HP - Hand Check Partial

Sayreville Board of Education
Bills And Claims Report By Vendor Name
Prescription Account - January 20, 2026

va_bill5.032923
11/30/2025

Total for Unposted Checks **\$671,606.41**

Sayreville Board of Education

Bills And Claims Report By Vendor Name

Prescription Account - January 20, 2026

va_bill5.032923
11/30/2025

Resolution that the list of claims for goods received and services rendered and certified to be correct by the Business Administrator, be approved for payment and further that the Secretary's and Treasurer's financial reports be accepted as filed.

Run on 01/16/2026 at 08:24:04 AM

Fund Summary	Fund Category	Sub Fund	Computer Checks	Computer Checks Non/AP	Hand Checks	Hand Checks Non/AP	Total Checks
	81	81			\$671,606.41		\$671,606.41
	GRAND	TOTAL	\$0.00	\$0.00	\$671,606.41	\$0.00	\$671,606.41

School Business Administrator
